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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named  
Inventor : J. Martin Carlson

Appln. No.: 10/027,949

Filed : December 21, 2001

Group Art Unit: 3743

For : SELF-ADHERING FRICTION REDUCING  
LINER AND METHOD OF USE

Examiner: K.M. Lewis

Docket No.: T291.12-0013

**PETITION FOR ONE-MONTH EXTENSION OF  
TIME AND FEE**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

I HEREBY CERTIFY THAT THIS PAPER IS BEING  
SENT BY U.S. MAIL, FIRST CLASS, TO THE  
COMMISSIONER FOR PATENTS, P.O. BOX 1450,  
ALEXANDRIA, VA 22313-1450, THIS

7th DAY OF June, 2005  
  
Z. Peter Sawicki  
PATENT ATTORNEY

Sir:

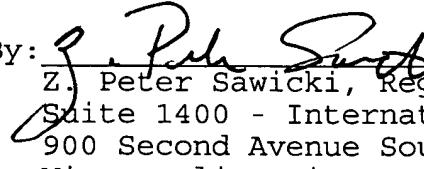
Pursuant to 37 C.F.R. § 1.136(a), Applicant hereby petitions for a one-month extension of time to respond to the Office Action dated February 23, 2005. Enclosed is a check in the amount of \$60.00 to cover the fee for the extension of time. If an additional extension of time is required, please consider this a petition therefor.

The Director is authorized to charge any additional fees associated with this paper or credit any overpayment to Deposit Account No. 23-1123. A duplicate of this Petition for Extension of Time is enclosed.

Respectfully submitted,

WESTMAN, CHAMPLIN & KELLY, P.A.

By:

  
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06/10/2005 MAHMED1 00000034 10027949

01 FC:2251

60.00 OP

ZPS:cnn

# FEE TRANSMITTAL

For FY 2005

JUN 09 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$ 60)

Complete If Known	
Application Number	10/027,949
Filing Date	December 21, 2001
First Named Inventor	J. Martin Carlson
Examiner Name	K.M. Lewis
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit 374
TOTAL AMOUNT OF PAYMENT	Attorney Docket Number T291.12-00013

## METHOD OF PAYMENT (Check all that apply)

Check  Credit Card  Money Order  None  Other (Please Identify): \_\_\_\_\_

Deposit Account - Deposit Account Number: 23-1123 Deposit Account Name: Westman, Champlin and Kelly

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayment of fee(s)  Credit any overpayments under 37 CFR 1.16 and 1.17

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>		
	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

### 2. EXCESS CLAIM FEES

#### Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

<u>Small Entity</u>
50

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

<u>Small Entity</u>
200

Multiple dependent claims

<u>Small Entity</u>
360

#### Total Claims

<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
0	x 50	= 0

HP = highest number of total claims paid for, if greater than 20

<u>Multiple Dependent Claims</u>
<u>Fee (\$)</u> <u>Fee Paid (\$)</u>

#### Indep. Claims

<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
0	x 200	= 0

HP = highest number of independent claims paid for, if greater than 3

<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
360	0

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
0	- 100 = 0	/ 50 = 0 (round up to a whole number) x	<u>250</u>	= 0

### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: 2251 - One-Month Extension of Time and Fee

60

## SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	30,214	Telephone: 612-334-3222
Name (Print/Type)	Z. Peter Sawicki		Date: <u>June 7, 2005</u>	